## SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. BEST AVAILABLE COPY TOTAL IND. TOTAL IND. . . TOTAL DEP. TOTAL DEP. TOTAL \* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)